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	APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORN	EY DOCKET NO.	
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				EXAMINER		
				ART UNIT	PAPER NUMBER	
		INTERVI	EW SUMMARY	DATE MAILED:		
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Exhi	bit shown or demonstration co	nducted: Yes No If yes, b	orief description:			
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lair	n(s) discussed: 45-	- 49				
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7		L's representative				
A fu	iller description, it necessary, a	ind a copy of the amendments, if a	available, which the examiner	agreed would render t	he claims allowable	
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	It is not necessary for applica	ant to provide a separate record of	the substance of the interview	w.		
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xan	niner Note: You must sign this	form unless it is an attachment to	another form.			
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